Worker's Compensation RATE NOTICE
for the Department of Labor & Industries
Olympia, Washington

| Effective Date |
| Unified Business Identifier (UBI) |
| Account ID |
| Experience Period |

is date of issue

Policyholder

(These represent base rates)

Class Code	Class Description	Experience Factor EF	X	Accident Fund (AF	+	Med Aid Fund MA)	+	Supp Pension SP	=	YOUR RATE	Payroll Deduction

▲

Use
Rate X Units*
of Work
When
Computing Your
Premiums
On The
Quarterly
Report

▲

This
Rate X Units*
of Work
May Be
Deducted
From Your
Employees
Payroll.

* Units and/or Hours

SAMPLE ONLY

You can CONTROL YOUR WORKERS COMPENSATION COSTS with:

ACCIDENT PREVENTION and CLAIMS MANAGEMENT

See reverse for more information →

F225-004-000 rate notice 10-01

ACCIDENT FUND base rate: This column displays the base rate of the accident fund for the assigned industry class code before experience rating. This portion of the rate is used to pay injured employees for lost wages during disability and to survivors of fatally injured workers.

EFFECTIVE DATE: The date on which the rates become applicable. PLEASE NOTE: The rates reflected on this notice are not to be used for reporting of units of work prior to the effective date.

EXPERIENCE FACTOR: This factor is based on your firm's claims costs and worker hours/units for the current experience period. The experience factor is applied to the accident fund and medical aid rate to reflect an earned decrease or increase in your premiums, compared to the base rate for a particular classification.

EXPERIENCE PERIOD: The time period used in computing your experience factor. The experience period is the oldest three of the past four fiscal years prior to the rate effective date.

MEDICAL AID FUND base rate: This column displays the base rate of the medical aid fund for the assigned industry class code before experience rating. This portion of the rate is used to pay for the medical treatment of injured workers.

PAYROLL DEDUCTION: The rate you may deduct from your employee's payroll times hours/units worked. The amount is computed by multiplying the medical aid rate by the experience factor; adding the results to the supplemental pension rate: then dividing that result by 2. $((MA \times EF) + SP) \div 2 =$ payroll deduction rate.

SUPPLEMENTAL PENSION: This portion of the rate supports cost-of-living increases to claimants with extended disability.

YOUR RATE: **This is the total premium rate that you will use when computing your premiums on the Quarterly Report of Payroll. Your rate is determined by adding the accident fund and medical aid fund; multiplying the results by the experience factor; then adding the supplemental pension.** $EF \times (AF + MA) + SP = $ Your Rate

For **questions** regarding your rate notice, **write to:**

Department of Labor and Industries
Employer Services
PO Box 44144
Olympia WA 98504-4144
(360) 902-4817

or call your Policy Manager, listed on the form.

SAMPLE ONLY